8-2-05

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mand Stup ISSUE FRE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u>

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

maintenance fee notification  CUI ENT CORRESPONDENCE  Harness Dickey & PO Box 828  Bloomfield Hills, N  3/03/2005 LWONDIM2 00000  FE:1501 1400.00  APPLICATION NO.	ns. TE ADDRESS (Note: Use Block 1 for 590 05/09/2005  & Pierce PLC  MI 48303  0086 503213 0970721  DA  PILING DATE	AUG 0 1 2005 7 FIRST NAI	Fee(s) Transmittal. The papers. Each addition have its own certifical Cell I hereby certify that it States Postal Service addressed to the Mattransmitted to the US)  G. Gregor  August	mailing can only be used for its certificate cannot be used all paper, such as an assignme of mailing or transmission.  rtificate of Mailing or Transhis Fee(s) Transmittal is bein with sufficient postage for fit its and the sum of	smission  ng deposited with the United rst class mail in an envelope sabove, or being facsimile date indicated below.  CONFIRMATION NO.		
09/707,217 TITLE OF INVENTIONS	11/06/2000		o Nagasaka AWING METHOD, A MASTI	9319T-000173	8204		
APPLN. TYPE	SMALL ENTITY NO	ISSUE FEE \$1400	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE 08/09/2005		
EXAM	INER	ART UNIT	CLASS-SUBCLASS	]			
EDUN, MOI	HAMMAD N	2655	369-275100				
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Please check the appropriate	e assignee category or catego	ries (will not be printed on th	ne patent): 🔲 Individual 🔲 C	orporation or other private gr	oup entity Government		
4a. The following fee(s) are enclosed:  4b  Issue Fee  Publication Fee (No small entity discount permitted)			Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-3213 (enclose an extra copy of this form).				
5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
			f any) or to re-apply any previous one other than the applicant; a reg				
Authorized Signature	J), My	Mivley /	7 Date	August / 27,382	, 2005		
This collection of informatic an application. Confidential submitting the completed at this form and/or suggestions Box 1450, Alexandria, Virg Alexandria Virginia 27317.	oplication form to the USPT of the reducing this burden, shinia 22313-1450. DO NOT	14. The information is requir /122 and 37 CFR 1.14. This /1.14. This /1.14. This /1.14. This /1.14. The will vary depending ould be sent to the Chief In SEND FEES OR COMPLET	ed to obtain or retain a benefit by collection is estimated to take 12 g upon the individual case. Any c ormation Officer, U.S. Patent and ED FORMS TO THIS ADDRES	the public which is to file (an minutes to complete, includio omments on the amount of ti Trademark Office, U.S. Dep S. SEND TO: Commissioner	d by the USPTO to process) ng gathering, preparing, and me you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,		

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Complete if Known

09/707.217

9319T-000173

FEE TRANSMITTAL

for FY 2005

TOTAL AMOUNT OF PAYMENT

\*\*or number previously paid, if greater; For Reissues, see above

Filing Date November 6, 2000 First Named Inventor Kimio Nagasaka Effective 10/01/2004. Patent fees are subject to annual revision. **Examiner Name** EDUN, Mohammad N Applicant claims small entity status. See 37 CFR 1.27

1595

Application Number

Art Unit

Attorney Docket No METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued) 3. ADDITIONAL FEES Credit card ☐ Check ☐ Money ☐ Other ☐ None Small Entity Large Entity Order ☑ Deposit Account: Fee Description Fee Paid Code (\$) Code (\$) 1051 130 2051 65 Deposit Surcharge - late filing fee or oath 50-3213 Account 1052 50 2052 25 Surcharge - late provisional filing fee Number or cover sheet. 1053 130 1053 130 Non-English specification Deposit 1812 2.520 1812 2.520 For filing a request for reexamination Account Epson R & D 1804 920\* 1804 9201 Requesting publication of SIR prior to Examiner action The Director is authorized to: (check all that apply)

☑ Charge fee(s) indicated below ☑ Credit any overpayments 1805 1.840 1805 1.8401 Requesting publication of SIR after Examiner action Charge any additional fee(s) during the pendency of this application 1251 120 2251 60 Extension for reply within first month Charge fee(s) indicated below, except for the filing fee 1252 450 2252 to the above-identified deposit account. 225 Extension for reply within second **FEE CALCULATION** 1253 1020 2253 510 Extension for reply within third month 2254 1. BASIC, FILING FEE 1254 1,590 795 Extension for reply within fourth month Large Entity **Small Entity** 1255 2,160 2255 1080 Extension for reply within fifth month Fee Description Code **(S)** Code (\$) Fee Paid 1401 500 2401 250 Notice of Appeal 1011 300 2011 150 Utility filing fee 1402 500 2402 250 Filing a brief in support of an appeal 1012 200 2012 100 Design filing fee 1403 1000 2403 500 Request for oral hearing 1013 200 2013 1452 100 Plant filing fee 500 2452 250 Petition to revive - unavoidable 1014 300 2014 150 Reissue filing fee 1453 1500 2453 750 Petition to revive - unintentional 1005 200 2005 100 Provisional filling fee 1501 1400 2501 700 Utility issue fee (or reissue) 1400 1502 800 2502 400 Design issue fee SUBTOTAL (1) (\$) O 1460 130 1460 130 Petitions to the Commissioner 1807 50 1807 50 Processing fee under 37 CFR 1.17 (a) 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Submission of Information Disclosure Extra Fee from 1806 180 1806 180 180 Stmt Claims below Paid Total Claims -20 Recording each patent assignment 0 10 8021 40 8021 40 per property (times number of Independent Claims -3 \*\* 0 × 0 properties) Filing a submission after final rejection 1809 790 2809 395 **Multiple** (37 ČFR § 1.129(a)) 0 ependent 1810 790 2810 395 For each additional invention to be Large Entity Small Entity examined (37 CFR § 1.129(b)) 1801 790 2801 Request for Continued Examination 395 Fee Fee Fee Description Code (\$) Code (\$) 1202 50 2202 25 Claims in excess of 20 Other fee (specify) #8001 patent copies 15 1201 200 2201 100 Independent claims in excess of 3 \*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)1595 1203 360 2203 180 Multiple dependent claim, if not paid 4. SEARCH/EXAMINATION FEES \*\* Reissue independent claims over 1204 200 2204 100 1111 500 2111 250 Utility Search Fee original patent 1112 2112 \*\* Reissue claims in excess of 20 and 100 50 Design Search Fee 1205 50 2205 25 over original patent 1113 300 2113 150 Plant Search Fee 1114 500 2114 250 Reissue Search Fee SUBTOTAL (2) (\$) O 1311 200 2311 100 Utility Examination Fee 1312 130 2312 65 Design Examination Fee

SUBMITTED BY Complete (if applicable)							
Name (Print/Type)	G. Gregory Schivley	Registration No. (Attorney/Agept) 27,382	Telephone	248 641 1600			
Signature	11 /his	per/Clintin	Date	August 1, 2005			

1313

1314

160

600

2313 80

2314

300

Plant Examination Fee

Reissue Examination Fee

SUBTOTAL (4)

(\$)0

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.